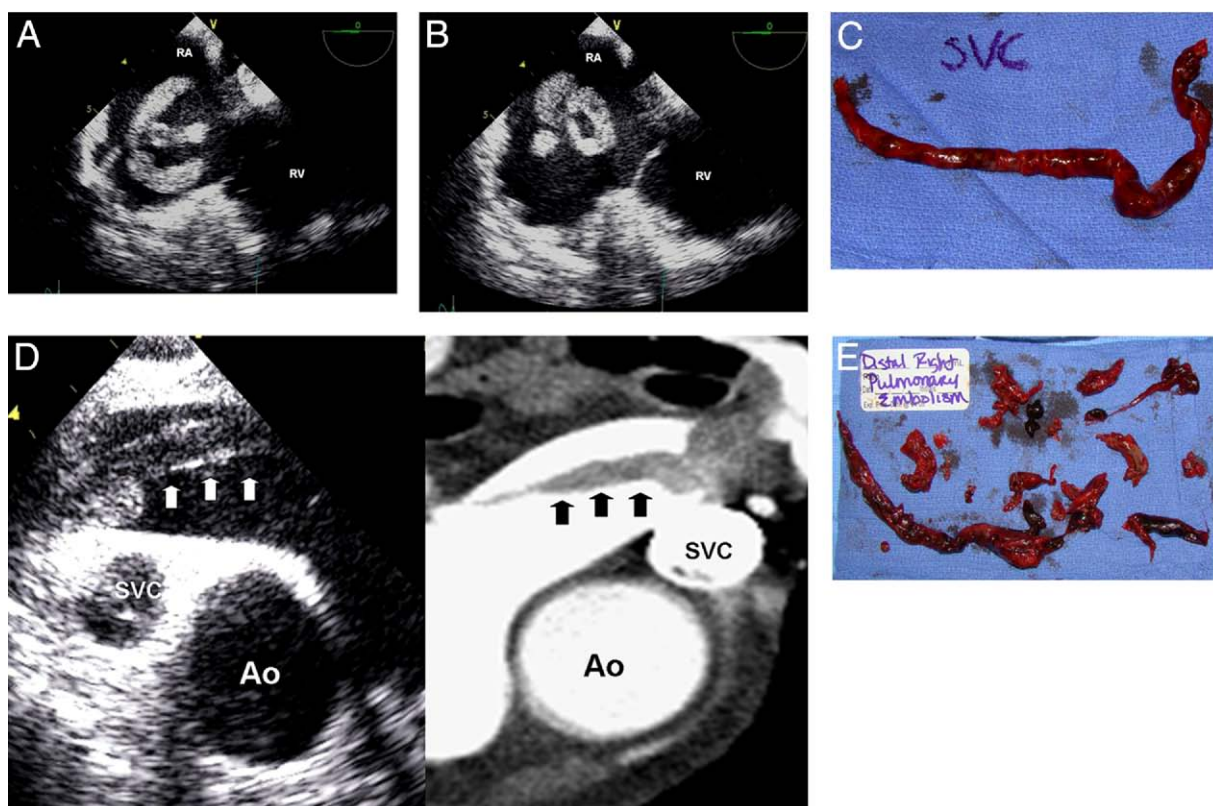


## IMAGES IN CARDIOLOGY

### A Literate Thrombus

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A 60-year-old female with neurosarcoidosis presented to the hospital with dyspnea on exertion. Initial evaluation revealed sinus tachycardia and oxygen desaturation. A contrast-enhanced computed tomography showed large acute pulmonary emboli in the pulmonary arteries. Transthoracic echocardiogram showed right ventricular enlargement and dysfunction, with large burden of free-floating thrombus in the right atrium protruding into the right ventricle (RV) in diastole. Pre-bypass intraoperative transesophageal echocardiogram revealed a long, highly mobile serpiginous echodensity (Online Video) in the right atrium (RA) resembling the letter E (A) and the number 8 (B) on still images. A venous cannula was placed in the superior vena cava, and venous drainage was immediately obstructed. On extraction of the cannula, a 21-cm by 1-cm serpiginous thrombus (C) was withdrawn from the right atrium in its entirety. Large thrombus burden was also identified in the right pulmonary artery by echo and contrast CT (D, arrows, left and right, respectively) requiring further thromboembolectomy (E). The patient was discharged on the 11th post-operative day, asymptomatic. Ao = aorta; SVC = superior vena cava.